Document Number Case Number 022 05-C-0180-C

United States District Court Western District of Wisconsin Theresa M. Owens

Filed/Received 02/07/2006 03:13:01 PM CST



ELEMENTARY SCHOOL RECORD Kdan GRADE ENROLLED TRANSFER, WITHDRAWAL, RE-ENTRY RECORD APTITUDE OR SPECIAL INTERESTS NAME OF TEACHER Young Allah ENTER DATA WITH DATES DATE FROM OR TO REASON BUILDING SCHOOL YEAR SEMESTER READING TOB LANGUAGE ARTS Ś E F SCIENCE ٤ 1. Illness; 2. Death: 3. Change of Address; 4. Work; 5 2 S+ MATHEMATICS A 5. OVER SCHOOL AGE: 6. EXPULSION: 7. INSTITUTIONALIZED: B. PRONOTED: 9. OTHER. 25 SPELLING A-A-CREDITS SENT TO. S SOCIAL STUDIES 5 HISTORY EMPLOYMENT CERTIFICATE HANDW MITTING 5 MUSIC S PHOTOGRAPH WITH DATE. FINGERPRINTS, OR OTHER AGRICULTURE IDENTIFICATION HEALTH 13 A 3 ART, S 8 6 PHY. ED. FY SCHOOL ATTITUDE -(70b) 5 E EFFORT IN WORK 5 Good DAYS ABSENT 0 0 1/2 TIMES TARDY 0 0 0 0 PROMOTED TO ST(Fin 44 EDUCATIONAL TESTS AND EVALUATIONS NAME Scheibe Trenton SCORETYPE VOCAB. SPELL XXXXXX SCIAL SCIENCE GRADE TI TEST DATE 3-31-76 GF AGE TYP. 3 Mo PUPIL NO. 20 OTHER INFORMATION LYL FM. NATL NOR NATL PR-S Ų 8 LOC. PR-S NATL NORMS SCALED SC 60 LOCAL HORMS STANFORD Achievement Test - 1973 Edition NO RT. Otis Lennen NAME STRENTON SCHEIBE SCORETYPE VOCAB MATTER TABLE SOCIAL MECHENICE SPELL BRADE OF THE STATE EM, TO SELECT MINE AND SELECT MAN GE A TOC. PR.S. GRADE NORMS

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Scheibe, Trenton James student

FINAL GRADE RECORD OF PUPIL (OFFICE)

SUBJECT *	Kindergarten Year 74-15	First Grade Year 75-74	Second Grade Year 76-77	Third Grade Year 17-18	Fourth Grade	Fifth Grade Year 9-80	Sixth Grade Year 80-81				
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EXTRA-CURRICULAR ACTIVITIES

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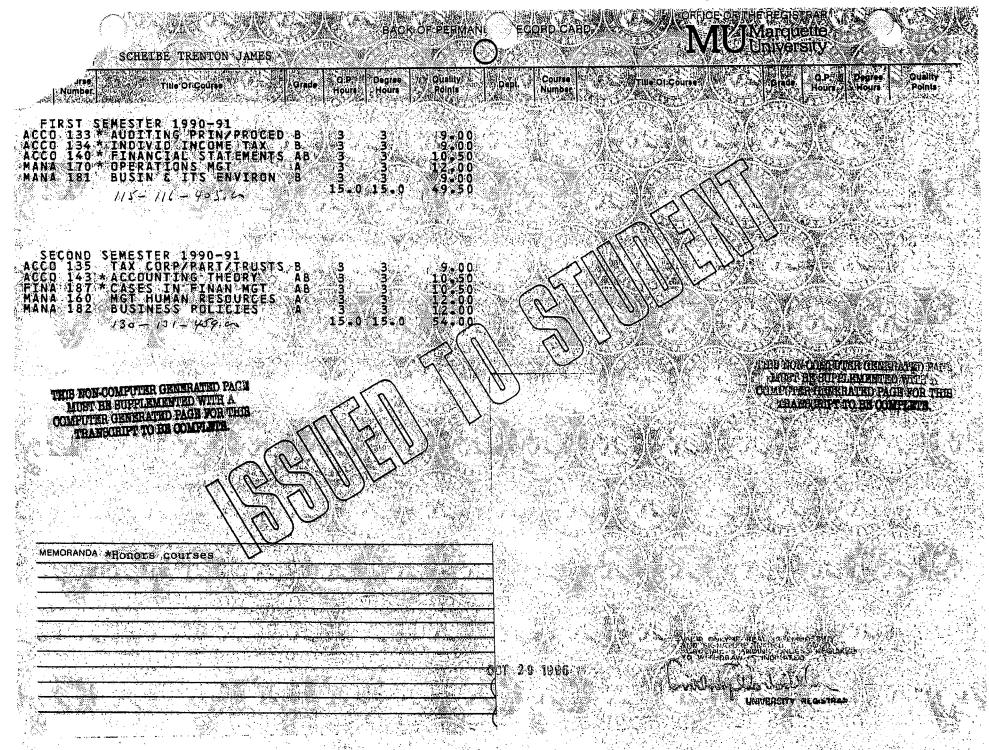
Explorers M.T.A. Honor Roll Quard 4.0+ (7 sem) Youth Rotav-12

Driver Training Certification 30 Hours Classroom Instruction 6 Hours Behind the Wheer irraction

awarde



	TRENTON HEST NAME	JAMES SECOND NAM		kb (D		Office of the JiMarqu Univer	ette 🐍	
Identifier 397-88-7293 Sex MALE Date of Birth DECEMBER 19, 1968 Place of Birth SHEBOYGAN, WI High School of MARSHFIELD SENTOR HIGH Graduation MARSHFIELD, WI 54449 H.S. Graduation Date JUNE, 1987	∑SC#0OL	SAT : Verba * Math ACT - Englis * Math - Soc. S Nat. S	680 th 28 28 sci. 24	Advanced Stance Summary of Dec Marquette / Tran	l'ée Grédis	MWwaukeps) OP 3 Apons OP 5 Boon 130, (Visconsin Degrae Hours Degrae Flours	Ouality Points Ouality Paints 459.0
Admitted Into College/Program BUSINESS ADMINISTRATION DAY Course	Degree/NonrDegree DEGREE	- Comp Date AUGUS!	onite 27	Total Gradualigis sum Degree High Dete MAY Major(s) ACC Minor(s) Hegos Quin	ORS BACHELOR OF	SCIENCE	131.0	459.0
FIRST SEMESTER 1987-88 BUEN 001 ORIENTATION-BUS. ADM S *ENGL 005 MAN AND MYTH 1 *HIST 001 GROWTH WEST CIVIL 1 MANA 030 BUSINESS INFO SYSTS A MSCS 070 FINITE MATHEMATICS A SPAN 003 INTERMEDIATE 1 A //-//- 55 //	de Hours Hours	10 - 50 - 2 - 60 - 12 - 80 - 12 - 80	Dept: Double Dou	SEMESTER LITTER FOR THE PREVIOUS PARTIES OF THE PREVIOUS PARTIES PARTIES OF THE PREVIOUS PARTIES PARTI	ABS-89 ATE ACCT DECONOMICS: A AND ORG ETHICS: B VE POLITICS A	Greek C.P. Greek House 18 3 18 3 18 3 18 0	Degree Shown	Quarty Points 10.50 10.50 12.00 9.00 10.50 10.50 63.00
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Marquette University

Office of the Registrar Milwaukee, Wisconsin 53201-1881

A transcript is official when it bears an embossed University seal and the signature of the University Registrar.

Student Name: TRENTON JAMES SCHEIBE

Identification # 397-88-7293

Date Issued: October 29, 1996

Page: 1 of 1

Send To:

TRENTON JAMES SCHEIBE 4211 CLAY HILL: APARTMENT #810 HOUSTON TX 77084 ISSUED TO STUDENT

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Disability Services

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-Confidential-

October 27, 2004

Trenton J. Scheibe 1529 N Peach Ave Marshfield, WI 54449

RE: USMLE Step 2 CK

USMLE ID#: 5-058-603-1

Dear Mr. Scheibe:

The National Board of Medical Examiners (NBME) processes requests for test accommodations on behalf of the United States Medical Licensing Examination (USMLE) program. We have received your request for test accommodations for Step 2 Clinical Knowledge (CK). This letter serves as your acknowledgement that the processing of your request has begun.

We will review the documentation received with your request and will contact you if any additional information is necessary. You can find information about test accommodations on USMLE and guidelines for submitting requests at www.usmle.org. When our review of your request is complete, you will be advised in writing of the decision.

Please note that if your eligibility period begins before a decision regarding your accommodations is made, we will extend your eligibility period for a full three months. You may decline this extension in your eligibility period, by contacting your case coordinator.

To protect your confidentiality, we do not provide information concerning the decision by telephone. However, if you have any other questions, you may call me at (215) 590-9509.

Sincerely,

Joy C. Orlemann

Case Coordinator, Disability Services

JO/rb

Disability Services 215-590-9509 215-590-9422 (Fax)



National Board of Medical Examiners® 3750 Market Street
Philadelphia, PA 19104-3102
215.590.9500

-Confidential-

November 10, 2004

Trenton J. Scheibe 1529 N Peach Ave Marshfield, WI 54449

RE: USMLE Step 2 CK

USMLE ID#: 5-058-603-1

Dear Mr. Scheibe:

We have conducted a preliminary review of your request for test accommodations for the United States Medical Licensing Examination (USMLE) Step 2 Clinical Knowledge (CK). However, the information you submitted is incomplete and we are therefore unable to make an informed decision about your request at this time.

In order for us to accurately evaluate your request, please have your evaluator, Dr. Fred W. Theye, provide age-based standard scores for all Woodcock-Johnson III (WJ-III) academic achievement tests and subtests administered during your August 2004 neuropsychological evaluation. This information will assist us in determining whether you are a covered individual as defined by the Americans with Disabilities Act and if so, what accommodations would be appropriate.

Please refer to the USMLE Guidelines for a comprehensive description of how to document a need for accommodation and discuss this information with your evaluators to assist you in compiling complete and comprehensive documentation. The Guidelines may be accessed on the National Board of Medical Examiners website at www.nbme.org. Click on "The United States Medical Licensing Examination (USMLE)," then choose "USMLE Test Accommodations for Step 1, Step 2 CK & Step 2 CS Applicants."

We will place your request for accommodations on hold until we receive sufficient additional documentation or your current eligibility period expires, whichever is sooner. Your current eligibility period ends on January 31, 2005. If you will not be able to provide additional information by this date, please contact your case coordinator, Joy C. Orlemann, at 215-590-9509. If we do not receive additional information from you before the end of your eligibility period, upon the expiration of your eligibility period your request for test accommodations will be cancelled and your registration will be processed under standard conditions. If you do not plan to submit more information and would like your registration released prior to the expiration of your eligibility period, please fax a statement to that effect to 215-590-9422 and call 215-590-9509 to confirm receipt.

Please send additional information to:

USMLE Disability Services 3750 Market Street Philadelphia, PA 19104

You may fax your material to 215-590-9422. Please call 215-590-9509 to verify receipt. If you have any other questions, please contact your case coordinator at 215-590-9509.

Sincerely,

J. Abram Doane, MA, JD Manager, Disability Services

ADA Compliance Officer, Testing Programs

JO

NEUROSCH NCCS

November 23, 2004

Trenton James Scheibe 1529 N Peach Ave Marshfield WI 54449

RH: Trenton Scheibe MHN: 264213 DOB: 12/19/1968

Dear Dr. Scheibe

This letter is being written in response to your request. I understand that the National Board of Medical Examiners have requested age-based standard scores for the Woodcock-Johnson Achievement Test. Below please find those scores:

Letter Word Identification 105 Reading Fluency 101 Math Fluency 113 Spelling 115 Writing Fluency 124 Passage comprehension 116

I hope this information will be of assistance to you in your application. If you have any need for further information, please feel free to contact me.

Sincerely yours,

Fred W. Theyc, Ph.D.

Department of Clinical Neuropsychology

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National Board of Medical Examiners® 3750 Market Street
Philadelphia, PA 19104-3102
215.590.9500

-Confidential-

December 7, 2004

Trenton J. Scheibe 1529 N Peach Ave Marshfield, WI 54449

RE: USMLE Step 2 CK

USMLE ID#: 5-058-603-1

Dear Mr. Scheibe:

This letter is pursuant to our telephone conversation on November 30, 2004 and your subsequent request on December 2, 2004 to have this information in writing to show to your evaluators.

Please have your evaluator, Dr. David Lachar, submit scaled scores for the *Nelson-Denny Reading Test* (NDRT) administered on your 2001 assessment. Additionally, all scores from the academic achievement tests for the 2001 evaluation should be reported using *age norms*. This information will assist us in determining whether you are a covered individual as defined by the Americans with Disabilities Act and if so, what accommodations would be appropriate.

Please send additional information to:

USMLE Disability Services 3750 Market Street Philadelphia, PA 19104

You may fax your material to 215-590-9422. Please call 215-590-9509 to verify receipt.

If you have any other questions, please contact me at 215-590-9509.

Sincerely,

Joy Orlemann

Case Coordinator, Disability Services

JO

Current Elect.

FAX 715-387-6222

PAGE 0

COVER SHEET Personal & Confidential

TO: National Board of Medical Examiners	FROM: Trenton J. Scheibe	MECEIVED			
_Attn: Joy Orlemann					
FAX No.: 215-590-9422	PHONE/FAX: 715-387-3227	Disability Services			
# PAGES:3 (including coversheet)		Services			
COMMENTS:Attached is the requested information from Dr. David Lachar					

Prom : David Lachar @David.Lachar@uth.tmc.edu>
Start : Wednesday, December 8, 2004 4:40 PM

To a trentachelbe@hotmail.com

Subject: Your evaluation.

Dear Dr. Scheibe:

Perhaps you could forward this note to MRMS. Otherwise I can fax something to them.

I am sorry to hear of your difficulties obtaining extended time to take step 2. NRME appears to not want to make such a determination, and their consultant, Dr. Featherman, describes the necessary disability that would prevent even the most motivated student from completing medical school.

It is first very important for all to understand how one diagnoses a reading disability in an adult who is in medical school. That is, what does a problem reader look like all grown-up and able to function in a medical school? The most likely remidual problem is a slow reading Mhat are you asking for? Help to compensate for your rate. slow reading so that you will read every item . not easy items because you have a cognitive limitation. Anyone wishing to discuss this issue with a national expert in reading disability should consult with Dr. Jack Fletcher of our Pediatrics department, who provided this wisdom.

As to the report and the Nelson Denny. All scores were (if tbey were not so provided) converted to standard scores of M + 100 and ad -15; this allows all values to be compared to the Wechsler 10 scores. In this way we compare a reading rate of approximately #1 (from my to a werbal IQ of 113 (a 32-point difference). This is the demonstration that you read slowly, not that you can't understand the written word (who would want such a person practicing medicine?). As for the Nelson Denny for those who must have manual scores, see table on page 38 for end of four-year college: Reading rate = 185 percentile for college graduates (i.e. slow reader), Vocabulary 74/80 = 248 (page 21) = 77th percentile (page 38), and Comprehension = **34** = 216 (page 21) • 23rd percentile, with Total • 128 = 234 (page 21) = 43rd

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otherwise bright individual. (Note that Mr. Doams is requesting the age standard scores of Dr. Theye's August 2004 evaluation, not mine.)

If this not sufficient, it would be interesting for the board to disclose the performance of graduating physicians who obtained catra time to complete Step 2. Who are these individuals and can they otherwise be expected to demonstrate the cognitive judgement to make competent clinical decisions? I'm willing to give my doctor more time to read a journal article or book, I'm not willing to have a doctor who

has compromised analytic ability or judgment.

Cordially,

David Lachar, Ph.D. Professor University of Texas Hental Sciences Institute 1300 Hoursund Rouston, Texas 77030 713 500-2600

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Disability Services



DEPARTMENT OF PSYCHIATRY & BEHAVIORAL SCIENCES

1300 Moursund . Houston, Texas 77030

713 500 2500 713 500 2530 fax

December 16, 2004

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Joy Orlemann Case Coordinator, Disability Services National Board of Medical Examiners 3750 Market Street Philadelphia, PA 19104-3102

DEC 2 3 2004

Disability Services

RE: USMLE Step 2 CK ID# 5-058-603-1 (Trenton J. Scheibe)

Dear Ms. Orlemann:

This note is in response to your request to Mr. Scheibe of 7 December. Please note that I am not privy to any other evaluation of Mr. Scheibe.

Of first importance is to understand our use of "standard scores" on reports from our clinic. We have adopted the habit of transforming all ability and achievement scores into age standard scores with a mean of 100 and a standard deviation of 15.

As to your request for standard scores of the Nelson-Denny Reading Test administered fall of 2001 we have for college graduates the following:

Dimension (manual page)	Raw Score	"Standard Score" (pp. 21 & 23)	Percentile (p. 38)
Reading Rate	185	188	14th
Vocabulary	74	248	7 7th
Reading Comprehension	54	216	23rd
Total	128	234	43rd

It is very important for all to understand how one diagnoses a reading disability in an adult who is in (or better yet, has successfully completed) medical school. That is, what does a problem reader look like all grown-up and able to function in a medical school? The most likely residual problem is a slow reading rate. What narrow accommodation is being requested? Help to compensate for this slow reading rate so that the applicant will have the opportunity to at least read every item of the test when it is

administered (or at least to read the average number of items completed by candidates who successfully complete the test) -- not a different set of easier items because of a cognitive limitation (versus a residual processing deficit). Anyone wishing to discuss this issue with a national expert in reading disability should consult with Dr. Jack Fletcher of our Pediatrics department, who has provided this wisdom.

As to the second question, the report provides grade equivalents and age standard scores (there are no post-graduate standard scores). As noted in the report, the pattern of non-reading (mathematics) being one standard deviation above reading scores is consistent with a problematic residual in an otherwise bright individual.

If such data are deemed insufficient to allow this basic accommodation, it would be interesting for the board to disclose the performance of graduating physicians who have been given extra time to complete the Step 2 examination. Who are these individuals and can they otherwise be expected to demonstrate the cognitive judgment to make competent clinical decisions? I'm willing to give my doctor extra time to read a journal article or book; I'm not willing to rely on the medical decisions of a doctor who has compromised analytic ability or judgment.

Sincerely,

David Lachar, Ph.D.

David Lacker

Professor

University of Texas Mental Sciences Institute

1300 Moursund

Houston, Texas 77030

713 500-2600

cc: Trenton Scheibe, 1529 N. Peach Avenue, Marshfield, WI 54449

National Board of Medical Examiners

Consultant Review Form

Consultant: STEVEN G. ZECKER, PHD

Case Review Hours: 3.25

Due Date: 1/19/05

Conference Hours: 0

Examinee: Scheibe, Trenton James

USMLE Step 2 CK

USMLE ID#: 5-058-603-1

Diagnosis is NOT supported by the documentation

Accommodation is NOT supported and justified

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JAN 2 0 2005

Disability Services

Steven G. Zecker, Ph.D. Clinical Psychologist 2103 Ridge Avenue Evanston, Illinois 60201 (847) 866-6933

January 18, 2005

J. Abram Doane, M.A., J.D.
Manager, Disabilities Services
National Board of Medial Examiners
3750 Market Street
Philadelphia, PA 19104

Dear Mr. Doane:

I am writing concerning the materials submitted to your office by Trenton James Scheibe, M.D., who has requested special accommodations for taking Step 2 (Clinical Knowledge) of the United States Medical Licensing Exam (USMLE). Specifically, in his request, Dr. Scheibe indicates that he has been diagnosed with learning disabilities (reading disorder), and that because of these disabilities he requires an extended time (double-time) testing accommodation to allow him to successfully complete Step 2 (CK) of the USMLE. Dr. Scheibe reports that he has a history of having received a similar accommodation during his medical school career at the University of Texas-Houston Medical School.

In support of his request for an extended time accommodation, Dr. Scheibe has submitted considerable supporting documentation, including 1) a personal statement, dated 10-19-04, indicating his reasons for submitting this request; 2) Dr. Scheibe's completed "Request for Test Accommodations" form, dated 10-19-04; 3) a 'Questionnaire for USMLE Step 1 and Step 2 Applicants Requesting Test Accommodation' form, completed and signed by Dr. Scheibe on 1/6/03; 4) a 'Certification of Prior Test Accommodations' form, dated 1-6-03, from M.C. McNeese, Associate Dean of Student Affairs at the University of Texas-Houston Medical School, verifying that Dr. Scheibe had received an extended time accommodation while a student in medical school; 5) the results of a psychological assessment conducted in September and October 2001 by D. Lachar, Ph.D., psychologist and Professor at the University of Texas-Houston Medical School; 6) an email from Dr. Lachar to Dr. Scheibe, dated 12-8-04, in which he explains the diagnostic process he used in the 2001 evaluation; 7) the results of a neuropsychological evaluation conducted in August 2004 by F.W. Theye, Ph.D., a psychologist in the Department of Clinical Neuropsychology at the Marshfield Clinic in Marshfield, Wisconsin; 8) a letter to Dr. Scheibe from Dr. Theye, dated 11-23-04, in which he provides scores based on age-based norms from the August 2004 evaluation; 9) a letter from C.M. Featherman, Ph.D. Assistant Vice President, Examinee Support Services at NBME, dated 3-24-03, in which she informs Dr. Scheibe that his earlier request for accommodations on Steps 1 and 2 of the USMLE had been denied; 10) a letter from your office, dated 11-10-04, in which you

describe to Dr. Scheibe the type of updated information he would need to submit to the NBME as a part of his request for accommodations; 11) a letter to Dr. Scheibe from J. Orlemann, Case Coordinator in Disability Services at the NBME, dated 12-7-04, in which she requests that Dr. Scheibe obtain additional information from Dr. Lachar regarding the scores reported in his 2001 assessment; 12) a letter from Dr. Lachar to Ms. Orlemann, dated 12-16-04, in which he provides the requested scores and offers additional support for Dr. Scheibe's request for accommodations; 13) photocopies of Dr. Scheibe's school transcripts from a) elementary school in Sheboygan, Wisconsin (1974-1981), b) high school in Marshfield, Wisconsin (1984-1987), c) undergraduate college years at Marquette University and the University of Wisconsin-Milwaukee (1987-1991), d) law school at Marquette University and the University of Houston (1991-1995) and e) medical school at the University of Texas-Houston Medical School (1997-2003); and 14) the results of previous standardized testing, including a) Stanford Achievement Test results from 1978, 1979, 1980 and 1981, b) Differential Aptitude Test results from 1982 and 1983, and c) Stanford Test of Academic Skills results from 1984 and 1986.

According to the documentation provided by Dr. Scheibe, he had no previous history of evaluations before 2001. He states that he has always been a slow reader and that he frequently found it difficult to complete assignments and examinations in the time allowed. Despite this reported difficulty, Dr. Scheibe was a highly successful student throughout his early academic career. A review of the transcripts he provided indicates mostly grades of 'A' with some grades of 'B' while an elementary school student. In high school he received no grade lower than 'A-' and graduated 6th in a class of 281 students. Significantly, this was apparently achieved without educational accommodations of any type. He obtained consistently good grades (all within the 'A' and 'B' range) in his undergraduate work at Marquette University and graduated cum laude with a 3.53 grade point average, again without having received accommodations. In law school his grades were in the 'A/B' range while attending Marquette University and in the 'B/C' range following his transfer to the University of Houston. While in medical school, Dr. Scheibe was required to repeat two courses but obtained otherwise passing grades. Concerns about his difficulties in medical school, especially on board examinations, led him to seek a psychological evaluation from D. Lachar, Ph.D. at the University of Houston in September and October 2001.

Dr. Lachar's evaluation of Dr. Scheibe's mental ability (using the Wechsler Adult Intelligence Scale-III (WAIS-III)) indicated that his Verbal IQ score (113) placed him in the High Average range, while his Performance (nonverbal) abilities were higher (124) and fell within the Superior range. Dr. Scheibe's overall mental ability fell at the upper end of the High Average range (119), a score that is identical to one obtained on the Otis-Lennon intelligence test when Dr. Scheibe was in sixth grade (according to his elementary school transcript). All index scores on the WAIS-III were in the High Average to Superior range. Dr. Lachar's testing further indicated that Dr. Scheibe was performing in the Average level or higher in all tests measuring memory functioning and in the Average to Superior range on a number of tests assessing reading and mathematical skills. According to Dr. Lachar's report, Dr. Scheibe did score poorly on one measure of reading, the Nelson-Denny Reading Test. On this measure, Dr. Scheibe's vocabulary was determined to be High Average, his comprehension Average, and reading rate Low Average. Dr. Lachar appears to rely heavily on Dr. Scheibe's low reading rate score in providing Dr. Scheibe with the diagnosis of Reading Disorder. Unfortunately, the reading rate score from the Nelson-Denny is problematic; it is obtained by simply asking the examinee to report how many words he has read during a single 60-second interval. It tends

to not be a reliable measure and a number of studies have questioned its validity as a measure of reading speed. The use of the Nelson-Denny in the diagnostic setting is discouraged by many professionals. Moreover, the reliance on a single score to provide a diagnosis is a practice that may lead to errors in diagnostic decision making. I note from the score summary sheet provided by Dr. Lachar that all other tests of reading administered (from the Woodcock-Johnson Psychoeducational Battery-3rd Edition: WJ-III) yielded scores in the Average range or higher. Importantly, Dr. Scheibe's score on the WJ-III's Reading Fluency measure, a different (and more technically sound) measure of reading speed and fluency, fell at the lower limits of the High Average range (standard score of 110). In my opinion, these results are not consistent with the diagnosis of Reading Disorder using the DSM-IV criteria. All other scores reported by Dr. Lachar in his report fall within the Average range or higher, with many at least one standard deviation above average. In conclusion, Dr. Lachar's testing did not provide evidence to support Dr. Scheibe's claim that he had significant learning disabilities that would qualify him for accommodations under the Americans with Disabilities Act (ADA).

In Dr. Scheibe's most recent evaluation, completed by Dr. Theye in August 2004, the results again led to the diagnosis of Reading Disorder. In reviewing Dr. Theye's report, I note that much of his discussion is not of current test results, but rather his interpretation of Dr. Lachar's results as well as those obtained on standardized tests while Dr. Scheibe was an elementary school student. Dr. Theye carefully discusses a number of these latter scores, which he states are indicative of a learning disability. I would begin my criticism of this approach by pointing out that these types of group administered achievement tests are not considered useful in the diagnosis of learning disabilities; they lack the necessary reliability (and hence, validity) to serve that role. Additionally all of Dr. Theye's discussion of these scores focuses on relative weaknesses and discrepancies among scores and not the degree of impairment relative to average functioning individuals. For example, in the seventh grade, Dr. Scheibe received a 'total reading' standard score on the Stanford Achievement Test that placed him at the 84th percentile, a result that puts him solidly within the High Average range. He obtained a 'total math' score on this same test that placed him in the Very Superior range (at the 99th percentile). Dr. Theye appears to use this difference in test scores to support the diagnosis of a reading disorder; that is, because Dr. Scheibe scored substantially lower on the total reading score than the total math score, he must therefore have had a reading disorder, according to Dr. Theye's thinking. However, Dr. Theye is not considering the fact that the reading score is solidly above average, and that such a score cannot be taken as indicative of a disability. It does appear that Dr. Scheibe's math skills were stronger than his reading skills at that time, but such variability across scores is commonplace among children and adults and is not by itself indicative of a disability in any way. My review of all of the standardized test scores shows that all showed that Dr. Scheibe had at least average achievement, regardless of the grade in which the testing was completed or the subject being tested. This is also not a result that is supportive of a diagnosis of a learning disability. Dr. Theye did administer six reading-related tests from the Woodcock-Johnson Psychoeducational Battery-3rd Edition and the Wechsler Individual Achievement Test-2(WIAT-2). I note from Dr. Theye's report that all of these measures (which assessed word identification, reading rate and fluency and comprehension) yielded scores that placed Dr. Scheibe in the Average range or higher. Dr. Theye states that the WJ-III Reading Fluency score (a percentile of 54, which corresponds to a standard score of 102) is "remarkable" in comparison to Dr. Scheibe's other, higher, scores. Again, this score is somewhat lower (although not significantly so) than Dr. Scheibe's word identification and comprehension scores, but it is Average and as such can not be taken as evidence for a disability that causes a significant functional

impairment in comparison to others of the same age from the general population.

To qualify for the requested accommodation under the Americans with Disabilities Act (ADA) it must have been demonstrated that Dr. Scheibe is unable to learn and achieve without accommodation at an average or better level in comparison to a representative sample of his peers from the general population. However, in evaluating all of the information provided by Dr. Scheibe to support his request for an extended time accommodation, I did not see sufficient evidence to support the diagnosis that has previously been provided, and as a result, I do not consider Dr. Scheibe's request for this accommodation to be warranted. Thus, my recommendation is that you deny Dr. Scheibe' request for accommodations for Step 2 (CK) of the USMLE.

Please feel free to contact me again if you have any questions about my evaluation of Dr. Scheibe's submitted documentation or if I may provide you with any additional information regarding Dr. Scheibe's request for accommodations.

Sincerely;

Steven G. Zecker, Ph. D. Clinical Psychologist Illinois Registration 071-003595



National Board of Medical Examiners® 3750 Market Street Philadelphia, PA 19104-3102 215.590.9500

CONFIDENTIAL

January 24, 2005

Trenton J. Scheibe 1529 N Peach Ave Marshfield, WI 54449

RE: USMLE Step 2 CK

USMLE ID#: 5-058-603-1

Dear Dr. Scheibe:

We have carefully reviewed your request for test accommodations for the United States Medical Licensing Examination (USMLE) Step 2 Clinical Knowledge (CK) and accompanying material in accordance with USMLE guidelines for examinees with disabilities and within the framework of the Americans with Disabilities Act (ADA). We consulted an expert in the field of disorders of learning to assist us in reviewing the documentation.

Learning difficulties of sufficient severity to substantially compromise reading and learning are generally recognized as being developmental in nature. Consequently, it is expected that chronic and pervasive difficulties with learning will emerge during childhood. Individuals with learning disabilities typically present a long history of academic difficulties and poor achievement dating back to elementary school. The documentation that you provided does not indicate that you have had a longstanding history of an inability to read at a level commensurate with same age peers. You have not provided any original school records verifying childhood learning problems, psychological testing, or identification for special services.

Professionally recognized diagnostic standards for a learning disability presume the existence of an underlying central nervous system dysfunction which is reflected in normative deficits in cognitive functioning and in related areas of academic functioning. Additionally, the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV)* diagnostic criteria include the requirement that the disturbance "significantly interfere with academic achievement." Although you report that you have always been a slow reader, your history of academic progress does not indicate that you experienced substantial difficulties in your ability to read and learn. On the contrary, the records you provided indicate that you achieved grades of A and B in elementary school and no grade lower than A- in high school, ranking 6th in your senior class of 281 students. You performed in the Average range and above on timed, standardized tests without accommodations, such as the Stanford Achievement Test, the ACT, and SAT. Your college transcripts indicate that you graduated with honors from Marquette University with a grade point average of 3.53, and achieved a law degree from the University of Houston, all without accommodations. It appears that you did not seek evaluation or accommodation prior to your fourth year of medical school in 2001.

In his letter dated December 16, 2004, Dr. David Lachar provided your October 2001 Nelson Denny Reading Test (NDRT) scores which indicate High Average range vocabulary, Average range comprehension, and Low Average range reading speed. While your evaluators appear to

rely heavily on the NDRT Reading Rate score in their diagnostic assignment of Reading Disorder, the NDRT is a screening test not intended for individual diagnosis. In addition, the NDRT Reading Rate is not considered a reliable measure of reading efficiency as it is determined on the basis of a single, one-minute sample of words-per-minute. All other tests of reading administered by Dr. Lachar and Ms. Gonzalez yielded scores in the Average range or higher. Furthermore, your performance on the Woodcock-Johnson, Third Edition (WJ-III) Reading Fluency subtest, a different and more technically sound measure of reading speed and fluency, fell at the lower limits of the High Average range.

According to your August 2004 evaluation report, your performances on all administered reading related subtests from the WJ-III and the Wechsler Individual Achievement Test, Second Edition (WIAT-II) fell in the Average range or higher. Your evaluator, Dr. Fred W. Theye, appears to base his diagnosis of Reading Disorder on reported discrepancies between and among your performances on various measures of intellectual ability and academic achievement. While relative differences may exist among your scores, they are all well within the range of average functioning and do not demonstrate cognitive or academic deficits that substantially impair your ability to read or learn compared to same age peers in the general population.

Accommodations are intended to provide equal access to the USMLE testing program for individuals who are covered under the Americans with Disabilities Act (ADA). A diagnostic label, in and of itself, does not establish coverage under the ADA. Regulatory decisions and case law have established that the ADA covers individuals who are "substantially limited" in a major life activity as the result of a disability. Determination of whether an individual is substantially limited in functioning as compared to most people is based on assessment of the current impact of the identified impairment. Performance on standardized tests and attending medical school are not defined by the law or accompanying regulations as major life activities. Working harder than others and performing below one's expectations on standardized examinations in a competitive academic environment are highly subjective judgments that even if possible to quantify, are not reflective of impaired functioning.

Overall, the documentation that you provided indicates at least average performances on a range of cognitive and academic tasks and does not demonstrate any deficits that substantially impair your ability to read or learn. Based on the information that you have provided, it appears that you are not substantially impaired in one or more major life activities. Your documentation does not demonstrate that you meet the Americans with Disabilities Act standard of disability. Consequently, I must inform you that we are unable to provide you with the requested accommodations.

We will advise Applicant Services to process your exam application without test accommodations. You may inquire at usmlereg@nbme.org or call Applicant Services directly at (215) 590-9700 with any questions about your scheduling permit.

Sincerely,

J. Abram Doane, MA, JD Manager, Disability Services

ADA Compliance Officer, Testing Programs

JAD/cef